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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/688,756	<b>FILING DATE</b> 10/16/2000 <b>RULE</b> -	<b>CLASS</b> 544	<b>GROUP ART UNIT</b> 1624	<b>ATTORNEY DOCKET NO.</b> 12152.76USD1
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A DIV OF 09/378,093 08/20/1999 \*  
WHICH CLAIMS BENEFIT OF 60/097,365 08/21/1998  
AND CLAIMS BENEFIT OF 60/097,359 08/21/1998  
(\*) Data inconsistent with PTO records.

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED \*\* 11/29/2000

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 42	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 11
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

**ADDRESS**

23552

**TITLE**

Therapeutic compounds

<b>FILING FEE RECEIVED</b> 675	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit _____